

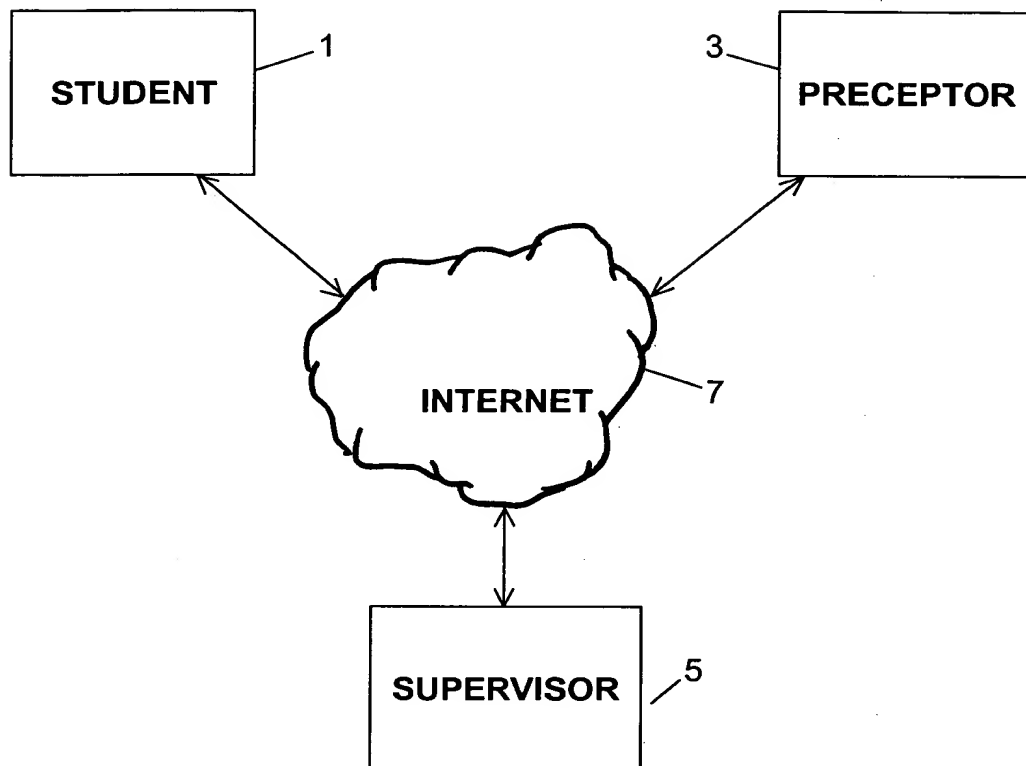
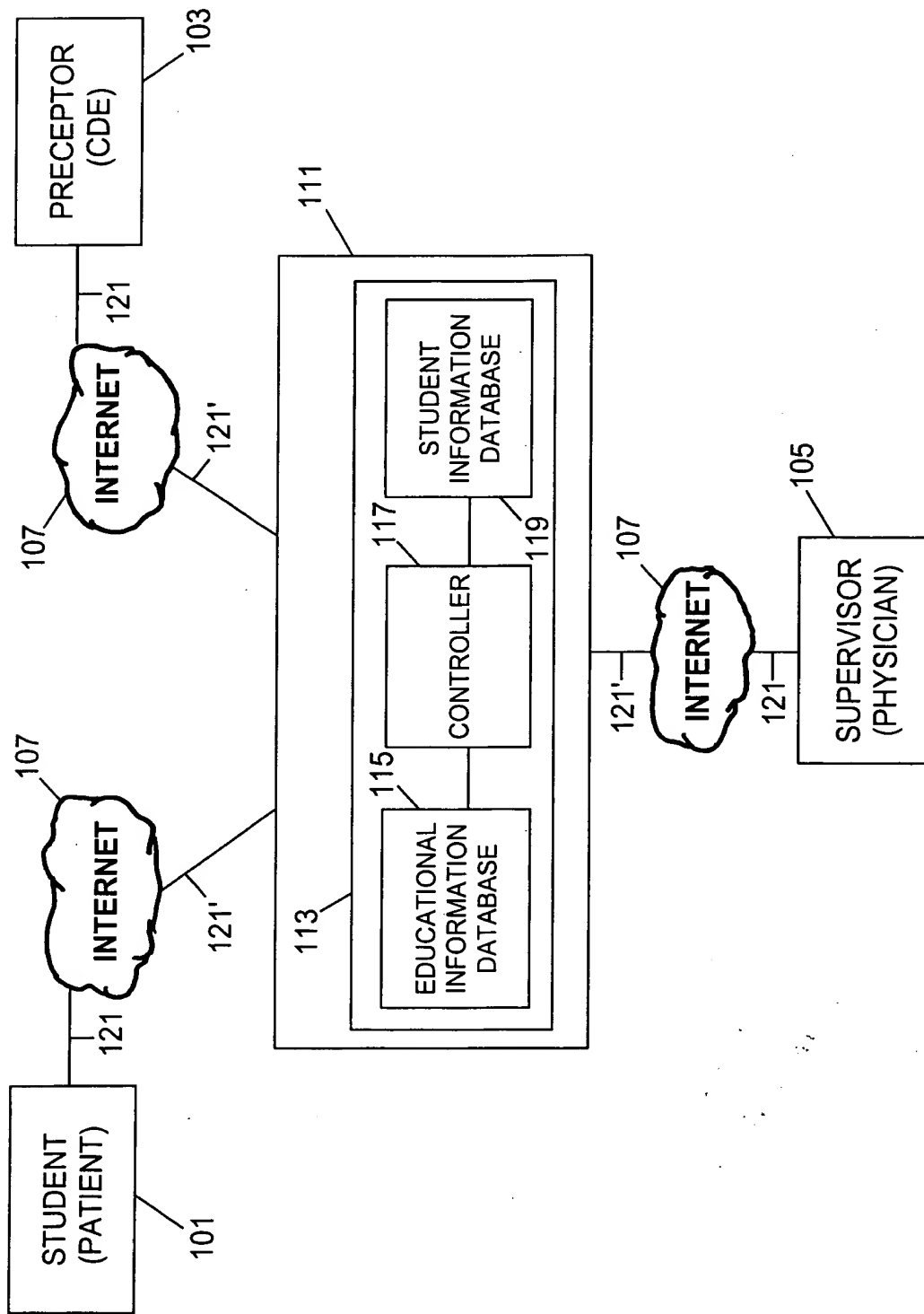
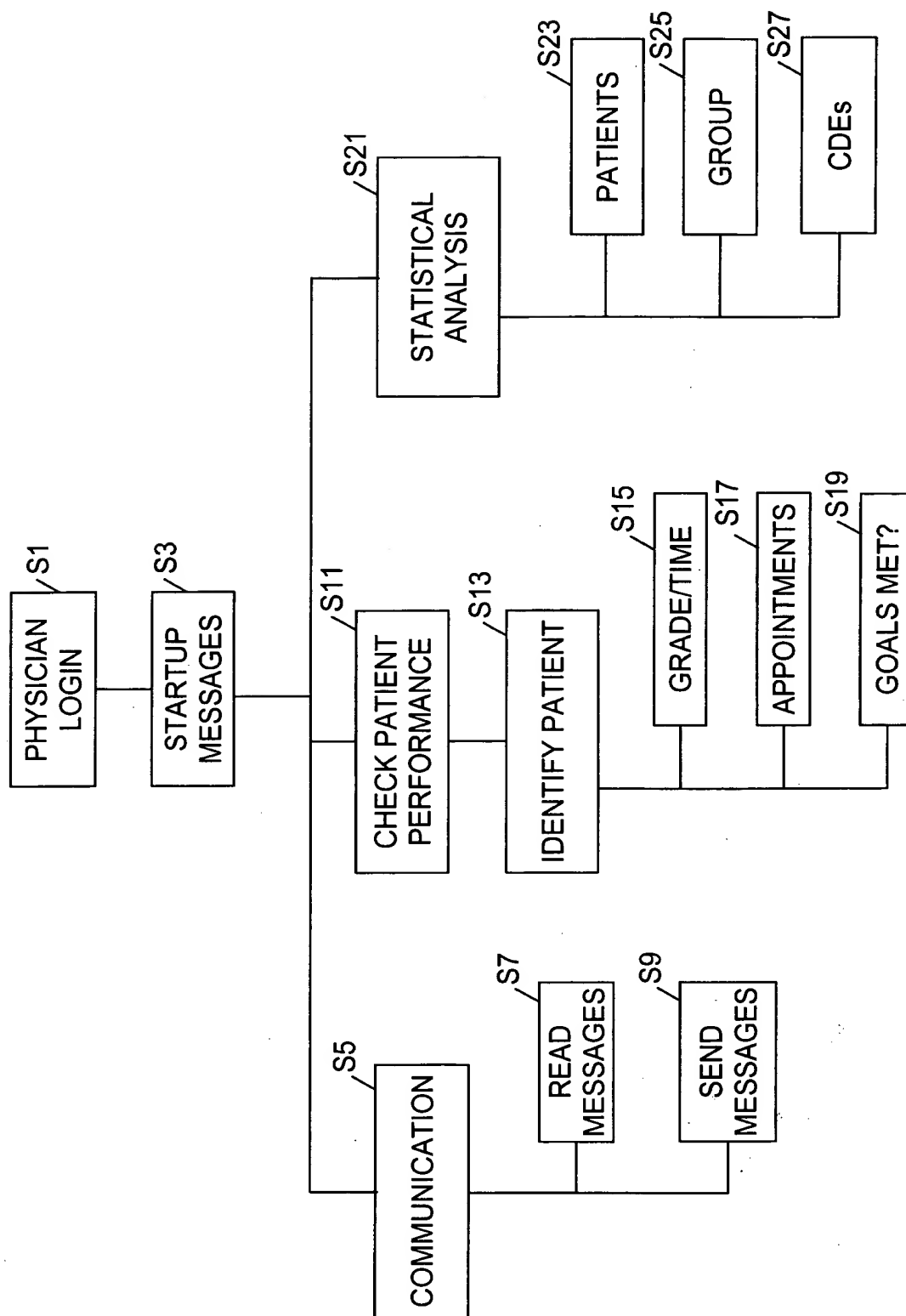
**FIGURE 1**

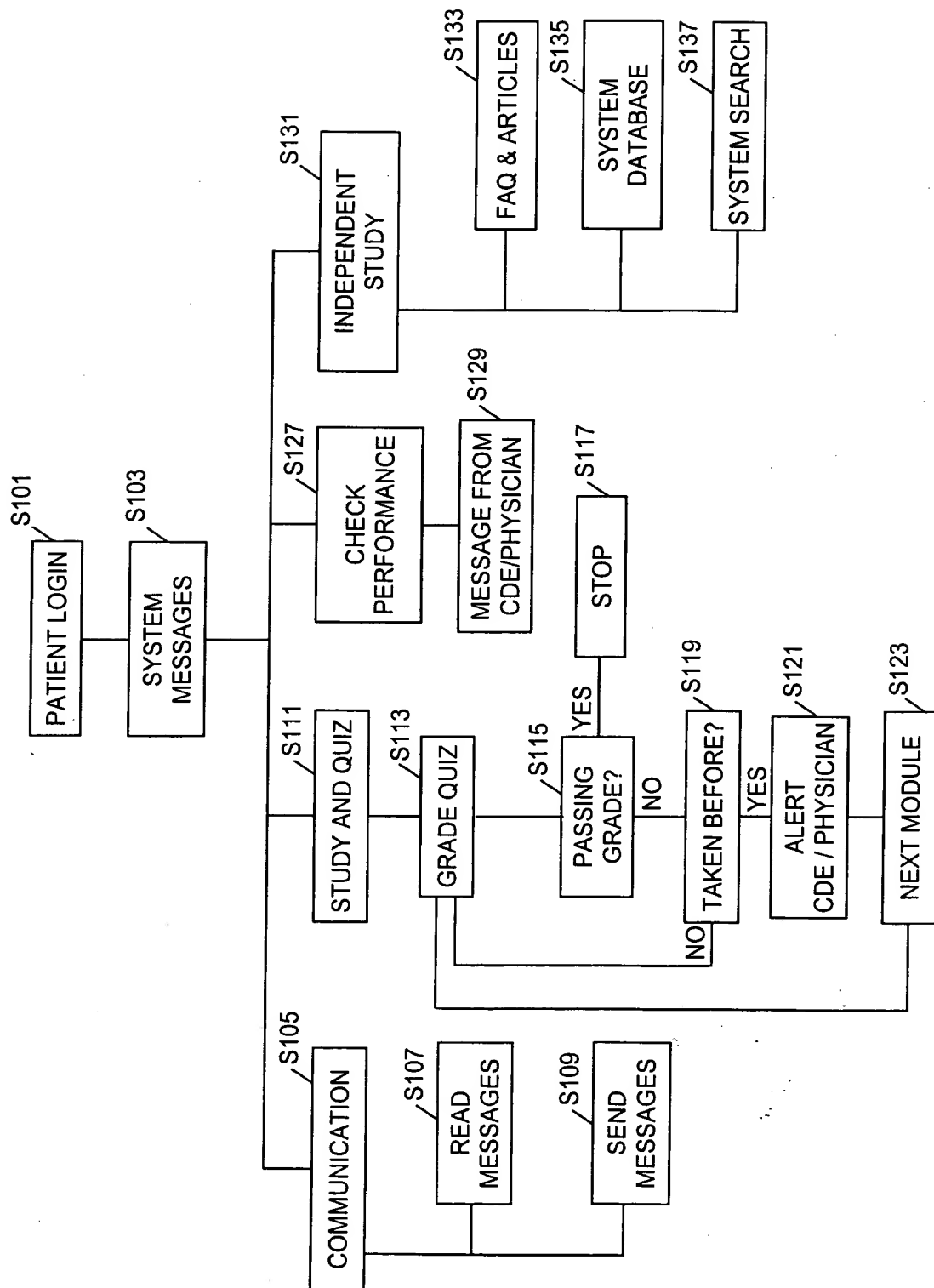
FIGURE 2



**FIGURE 3**



# FIGURE 4



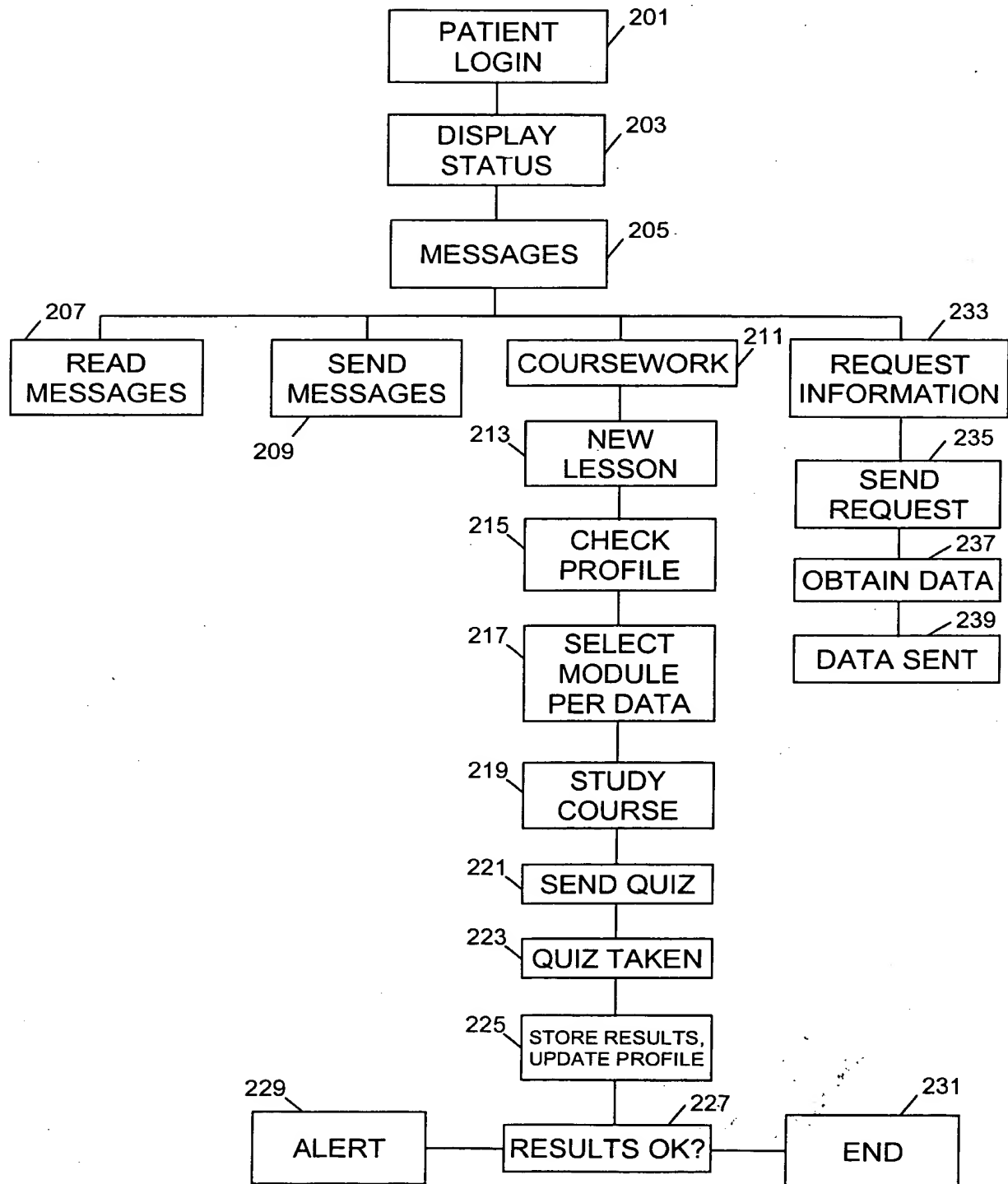
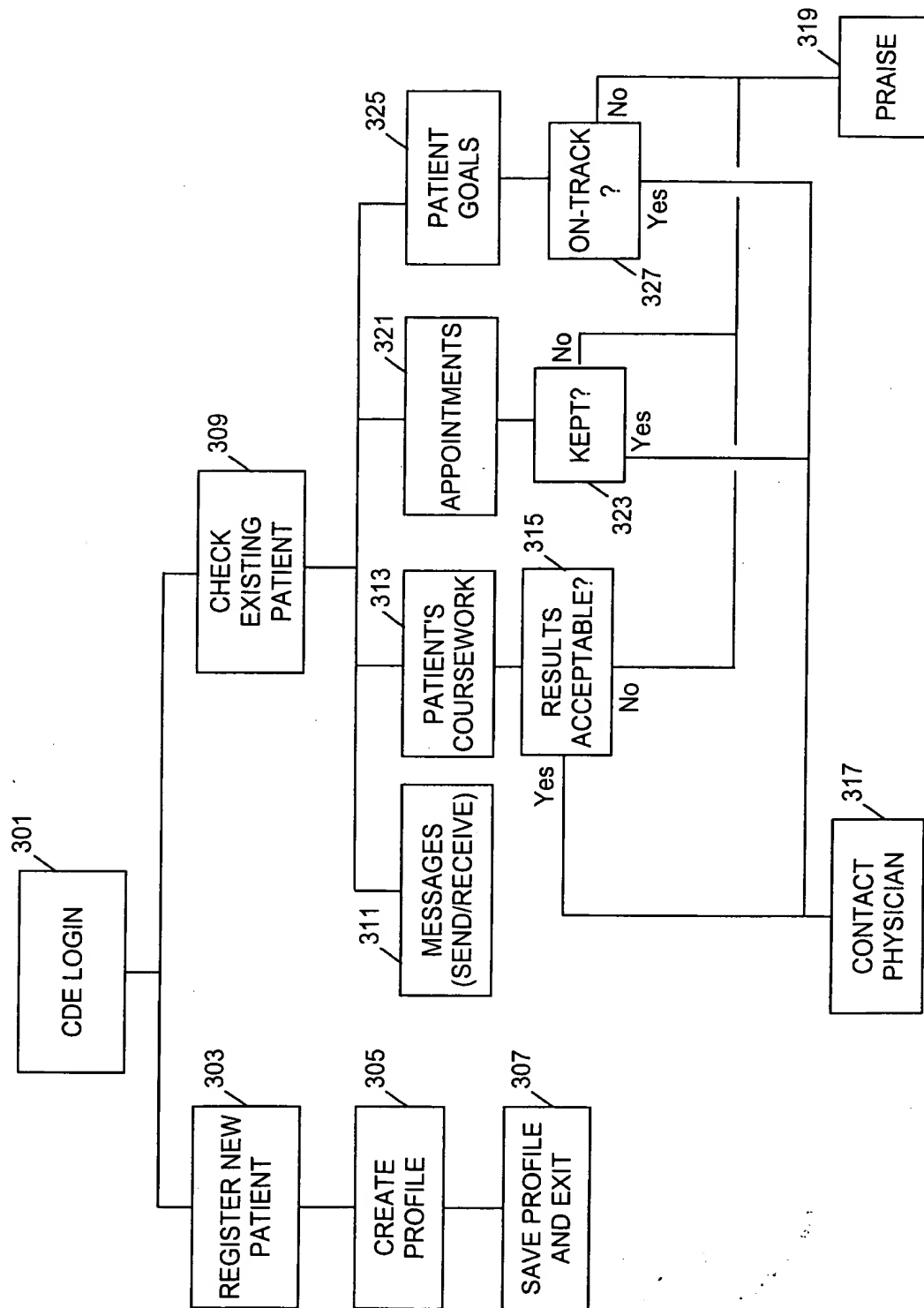
**FIGURE 5**


FIGURE 6



About NovoTrack | Legal




FIG. 7A



# NOVO TRACK

**Ralf Ackermann**  
Personal Scorecard  
Physician  
Geoffrey Gates, MD  
Diabetes Control  
A1c 7.5 %  
Next Appointment  
04/20/01  
NovoTrack Progress  
37 of 35 topics  
completed  
Message Center - 0



DIABETES

FAQS | Glossary | Credits | Legal | Home

TRACK

1 2 3 4 5 6 7

## GUIDE TO GOOD CARE

**Welcome to NovoTrack - your program to good diabetes care!**  
This program was designed for you. You will find what you need to know about diabetes in the Guide to Good Care, Personal Scorecard and Message Center.


**Guide to Good Care** is a course in 7 tracks with 35 topics that were chosen to fit you and your diabetes. We recommend that you start at the beginning, but you can start anywhere and complete the topics in any order. Remember to answer the questions after reading each topic. You can reach the course by selecting a numbered button at the top of this page.

**Personal Scorecard** gives you access to vital information about your diabetes from your primary care provider. Explanations of each test help you to understand where you are now and where you should be going to reach the goals of good diabetes care. The Personal Scorecard can be reached from this homepage on the right or from the BioBox on the left of each page.

**Message Center** is a secure way to send messages to a nurse in your physicians office who can find answers to your questions about diabetes. The nurse will be following your progress through the Guide to Good Care. Remember that you and your physician make all the decisions about your individual medical care. Message Center can be reached from this homepage on the right or from the BioBox on the left of each page.

You can reach this homepage at any time by clicking on "NovoTrack" in the upper left corner or the "Home" menu item at the top of each page.

Now you are ready to get your diabetes on track - NovoTrack!



**PERSONAL SCORECARD**  
Get instant access to vital info about your diabetes from your primary care provider.

GO

**MESSAGE CENTER**  
Post a message to a CDE who can answer your questions about diabetes.

GO

FIG. 7B





# NOVO TRACK

Ralf Ackermann  
Personal Scorecard  
Physician  
Geoffrey Gates, MD  
Diabetes Control  
A1c 7.5 %  
Next Appointment  
04/20/01  
NovoTrack Progress  
37 of 35 topics  
completed  
Message Center - 0



DIABETES

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TRACK



TRACK 2

## WHAT IS DIABETES?



This section explains how your body works and what happened when you got diabetes.

Before you had diabetes, your body automatically made adjustments to keep your blood glucose at just the right level. Now that you have diabetes, you have to think about it. You have to make decisions that your body once made for you.

This section will tell you how your body worked before you had diabetes and how it works now.

NEXT

Topics

Before You Had  
Diabetes

What Causes Diabetes

Effects of Diabetes

Who Gets Diabetes

FIG. 7C



# NOVO TRACK

Ralf Ackermann  
Personal Scorecard  
Physician  
Geoffrey Gates, MD  
Diabetes Control  
A1c 7.5 %  
Next Appointment  
04/20/01  
NovoTrack Progress  
38 of 35 topics  
completed  
Message Center - 0

DIABETES



TRACK

1 2 3 4 5 6 7

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TRACK 2

## WHAT IS DIABETES?

FIG. 7D(1)

### Effects of Diabetes

#### A Healthy Life

People with diabetes can live long and active lives. Knowing how to treat your diabetes can help you avoid the symptoms of high and low blood glucose. Maintaining good diabetes control over time reduces the risk of long term complications.

No one would want to have diabetes, but those who rise to the challenge of good diabetes care may find strengths that they never knew they had.



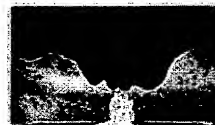
People can live long and healthy lives with diabetes.

#### High Blood Glucose

Both high and low blood glucose can cause symptoms that go away after the blood glucose returns to an acceptable level. In rare circumstances, extremes of either high or low blood glucose can lead to coma with results that may not be easy to reverse.

The symptoms of a very high blood glucose are thirst, excessive urination, fatigue, weakness and loss of weight. Other symptoms can occur including blurring of vision and difficulty healing wounds or fighting infections.

When your blood glucose is very high, the body can flush some of the excess blood glucose out of your system by putting it into the urine. You get thirsty as your body loses more and more water in the sugary urine. Frequent trips to the toilet can disturb sleep and interrupt activities during the day.



Thirst, excessive urination and other symptoms of diabetes do not occur until the blood glucose levels are extremely high.

If a high blood glucose is left untreated, you can begin to lose weight. The weight you lose is not a healthy weight loss. Even though the blood glucose is high, the glucose can't get into the cells so the cells don't get the energy they need to do their work. Muscle is being broken down to make even more glucose. This results in weakness and fatigue.



Loss of vision (and other long term complications) can be prevented by good diabetes care.

At a certain level of blood glucose, the brain cannot function well. The most severe consequences of an extremely high blood glucose are confusion and eventually coma. These complications can be prevented by the most basic diabetes care.

#### Low Blood Glucose

Low blood glucose is usually the result of treatment that is not matched to a person's needs. This topic is covered extensively in Section 2 Using Medications Wisely.

#### Long-Term Complications

The complications of diabetes are not inevitable. High blood glucose can damage many different organs in your body. How diabetes damages an organ is complex and not completely understood even by scientists who study these problems. It has been shown by a number of studies that maintaining good control of blood glucose reduces the risk of complications. Control of other risks such as high blood pressure and cholesterol can also reduce the risk of complications.



Weight loss because of

Each of the major complications of diabetes is discussed at greater length in Track 6 Complications.

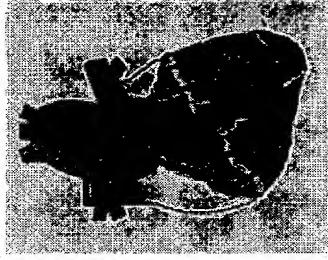
#### Heart Disease

You may not think of a heart attack as a complication of diabetes - but it is! People with diabetes are at greater risk of diseases caused by cholesterol that builds up and blocks vital arteries. People without diabetes can get blockage in an artery leading to a heart attack, stroke or other circulatory complication. Diabetes just makes all of these complications worse.

Fortunately, various treatments have been shown to reduce the risk of heart disease and other circulatory problems for people with diabetes. You can learn more about this subject in Track 4 Treating High Blood Pressure and Treating High Cholesterol and in Track 6 Heart Disease.

Go To Questions

high blood glucose is not healthy. A large part of the weight loss is muscle - with weakness and fatigue as a result.



Diabetes increases the risk of heart disease. Good diabetes care reduces the risk.

SEE HOW  
IT WORKS!

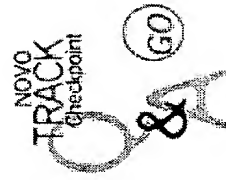



FIG. 7D(2)




NOVO  
TRACK

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TRACK

1 2 3 4 5 6 7



TRACK 2

WHAT IS DIABETES?

Ralf Ackermann  
Personal Scorecard


Physician  
Geoffrey Gates, MD  
Diabetes Control  
A1c 7.5 %  
Next Appointment  
04/20/01  
NovoTrack Progress  
38 of 35 topics  
completed  
Message Center - 0

☒ Frequent urination is always a symptom of diabetes.

☐ True  
☐ False

Back to Track 2.3

NEXT



DIABETES

NOVO  
TRACK  
Checkpoint

Q & A

FIG. 7E



# NOVO TRACK

Ralf Ackermann  
Personal Scorecard  
Physician  
Geoffrey Gates, MD  
Diabetes Control  
A1c 7.5 %  
Next Appointment  
04/20/01  
NovoTrack Progress  
37 of 35 topics  
completed  
Message Center - 0

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TRACK



## PERSONAL SCORECARD

### How Am I Doing?

This is a good question to ask. Your personal scorecard helps you to answer this question.

Each of the test results to the right of this page has been selected with a purpose. Click on the test result to see an explanation of the test and its significance to your health.

Each test predicts the risk of one or more of the long-term complications of diabetes. For each test, treatment that moves the value toward the recommended goal is beneficial.

Not everyone can achieve the goals set by the American Diabetes Association and others. For some, these recommendations are not appropriate due to other medical concerns. You and your healthcare provider will need to decide goals that are appropriate for you. You can record these values by clicking the Personal Diabetes Goals at the bottom of the column to your right.

### Personal Care

### Personal Goals

Blood Glucose Testing  
Average 7 per week

### Laboratory Tests

Diabetes Control  
A1c 7.5%

Kidney Health  
Urine albumin 532

Cholesterol Profile  
Total cholesterol - 211  
HDL cholesterol - 40  
LDL cholesterol - 110  
Triglycerides - 346

### Physical Examination

Weight/BMI  
150 lbs/32

Blood Pressure  
160/100

Foot Sensitivity  
sensitive

Eye Examination  
10/25/01

FIG. 7F

09877492 . 040102

CDE - Microsoft Internet Explorer

**CDE CONSOLE**  
ADMINISTRATIVE USE ONLY

Profile Message Center Appointments Outliers/Alerts

New Edit

**Patient Finder**

Last Name:  Physician's Last Name:

GDE:  Sort by:

☒ active only ☐ inactive only

Patient	Provider	Age
Ⓢ Ackermann, Ralf	Geoffrey Gates, MD	Hanne Vesterdal

FIG. 76

CDE - Microsoft Internet Explorer

NOVO TRACK CDE CONSOLE  
ADMINISTRATIVE USE ONLY

Profile Message Center Appointments Outbox/Alerts

User Name:  Inactive: ☐  
Password:  Confirm Password:   
CDE:  Registration Date: 11/13/00

---

First Name:  Last Name:   
Address:   
  
City:  State:  Zip Code:   
Phone:  Email:

---

Medical/Goals Reg. Questions Track Progress Appt Goals Alerts

Save Cancel

FIG. 7H

CDE - Microsoft Internet Explorer

**NOVO TRACK CDE CONSOLE**  
ADMINISTRATIVE USE ONLY

Profile | Message Center | Appointments | Outliers/Alerts | Admin

Patient: Ralf Ackermann Registration #: 201

Physician's First Name: Geoffrey Last Name: Gates Suffix: MD ☒

Type of Diabetes: Type 2 ☒ Gender: Male ☒ Age: 41 Height: 178

Foot Care: High Risk ☒ Neuropathy: Absent ☒

Nephropathy: Present ☒ Heart Disease: Present ☒

Retinopathy: Absent ☒

Test	Result	Date	Goal
edit A1C (%)	7.5	3/29/00	7.0
edit Urine Albumin	532	10/10/00	400
edit Total Cholesterol (mg/dL)	211	10/1/01	160
edit HDL (mg/dL)	40	12/13/01	40
edit LDL (mg/dL)	150	10/10/00	100
edit Triglycerides (mg/dL)	346	10/10/00	200
edit Weight (lbs)	150	10/10/00	180
edit BMI	32	10/10/00	26
edit Blood Pressure (mmHg)	160/100	10/10/00	135/80
edit Foot Sensitivity	sensitive	10/10/00	sensitive

Blood Sugar Goals	
edit Number of Tests (specify per week or day)	7 per week
edit Before Breakfast (mg/dL)	100-150
edit Before Lunch/Dinner (mg/dL)	80-140
edit 2 hours after eating (mg/dL)	less than 200
edit Bedtime (mg/dL)	120-160

Save Cancel

FIG. 7I



CDE - Microsoft Internet Explorer

NOVO TRACK CDE CONSOLE  
ADMINISTRATIVE USE ONLY

Profile Message Center Appointments Outlets/Alerts Settings

Patient: Ralf Ackermann

1. Subjective Duration of Diabetes  
established patterns

2. Attitude Toward Future Complications  
fatalistic

3. Level of Activity  
sedentary

4. Frequency of Blood Sugar Monitoring  
infrequent

5. Attitude Toward Smoking  
smoker-does not want to quit

6. Attitude Toward Insulin  
Type 2 rejects

Save Cancel Answer Key

FIG. 7J

NOVO TRACK CDE CONSOLE ADMINISTRATIVE USE ONLY

Profile Message Center Appointments Outliers/Alerts

< Back

Patient: Rolf Ackermann

Topic	Topic	Date Completed	Attempts	Questions Answered
5.4	Asking for Help	05/09/01	1	0 of 3
4.4b	Proof That Good Care Matters	03/14/01	1	0 of 3
5.1b	A Healthy Attitude	03/16/01	30	2 of 3
4.2b	How Diabetes Medications Work	03/29/01	7	0 of 3
6.5b	Treating Heart Disease	11/20/00	2	3 of 3
2.2b	What Causes Diabetes	03/29/01	20	3 of 3
6.7	Dental Care	05/09/01	2	0 of 3
4.4b	Hypoglycemia	03/29/01	1	0 of 3
4.7	Treating High Blood Pressure	03/29/01	2	0 of 3
4.6	Treating High Cholesterol	05/17/01	23	3 of 3
6.1a	Preventing Retinopathy	05/09/01	2	0 of 3
6.4b	Foot Care	05/09/01	0	0 of 3

FIG. 7K

CDE - Microsoft Internet Explorer

**NOVO TRACK** **CDE CONSOLE**  
ADMINISTRATIVE USE ONLY

Profile | Message Center | Appointments | Orders/Reports | Clinical

Patient: Ralf Ackermann

**Physician**

Date of last Physician Appointment: 10/10/00

Next Physician Appointment Goal: 4/20/01

Actual Physician Appointment: 4/20/01

*\*NOTE: Dates must be entered in the following format: m/d/yy or mm/dd/yyyy*

**Ophthalmologist**

Date of last Ophthalmologist Appointment: 1/4/00

Next Ophthalmologist Appointment Goal: 1/4/01

Actual Ophthalmologist Appointment: 10/25/01

*\*NOTE: Dates must be entered in the following format: m/d/yy or mm/dd/yyyy*

Save Cancel

FIG. 7L

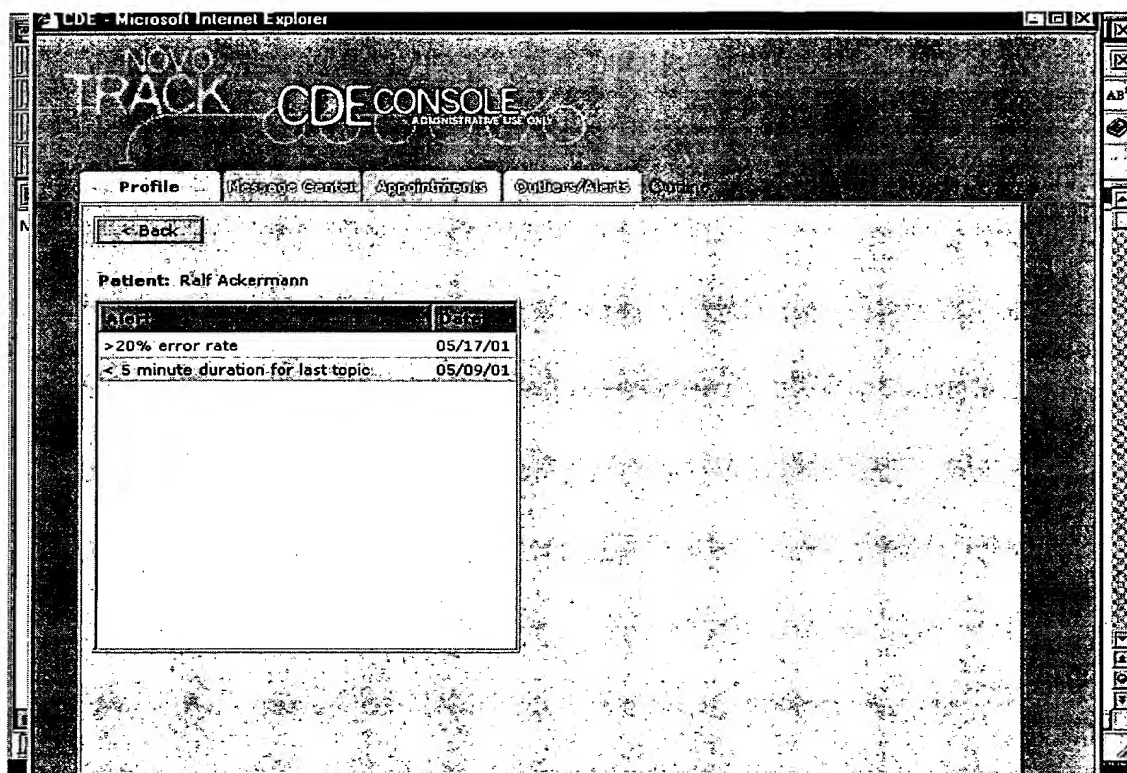


FIG. 7M

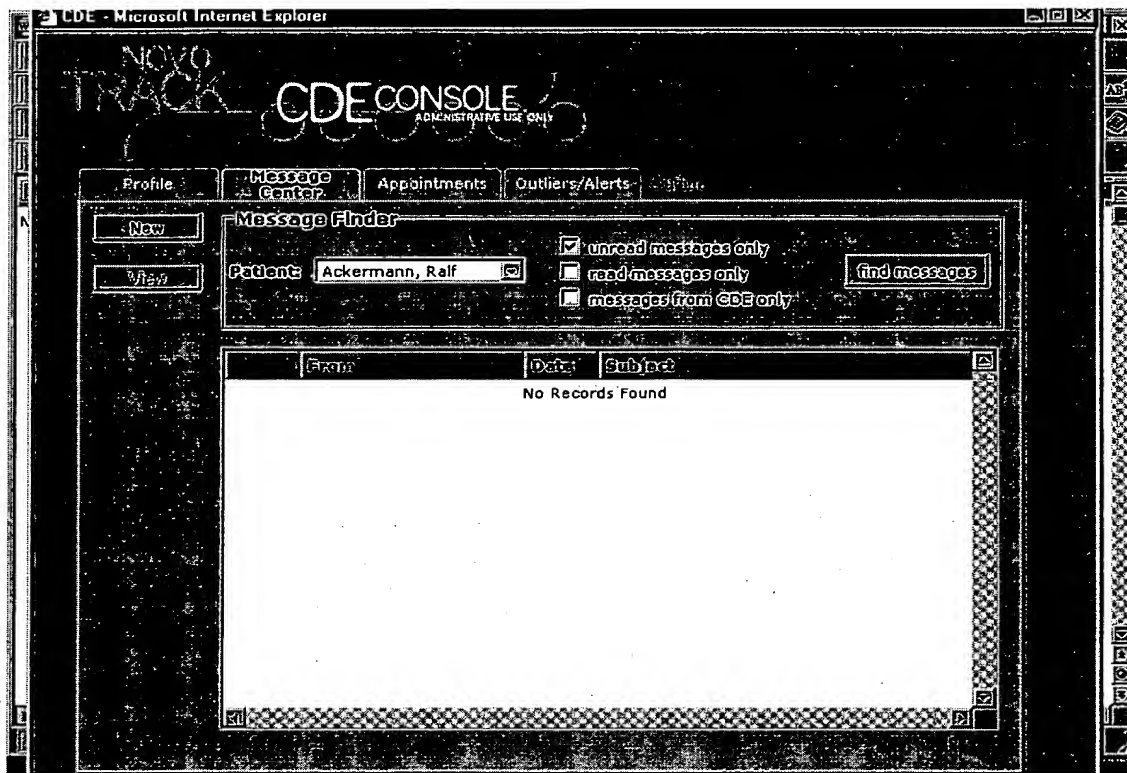


FIG. 7N

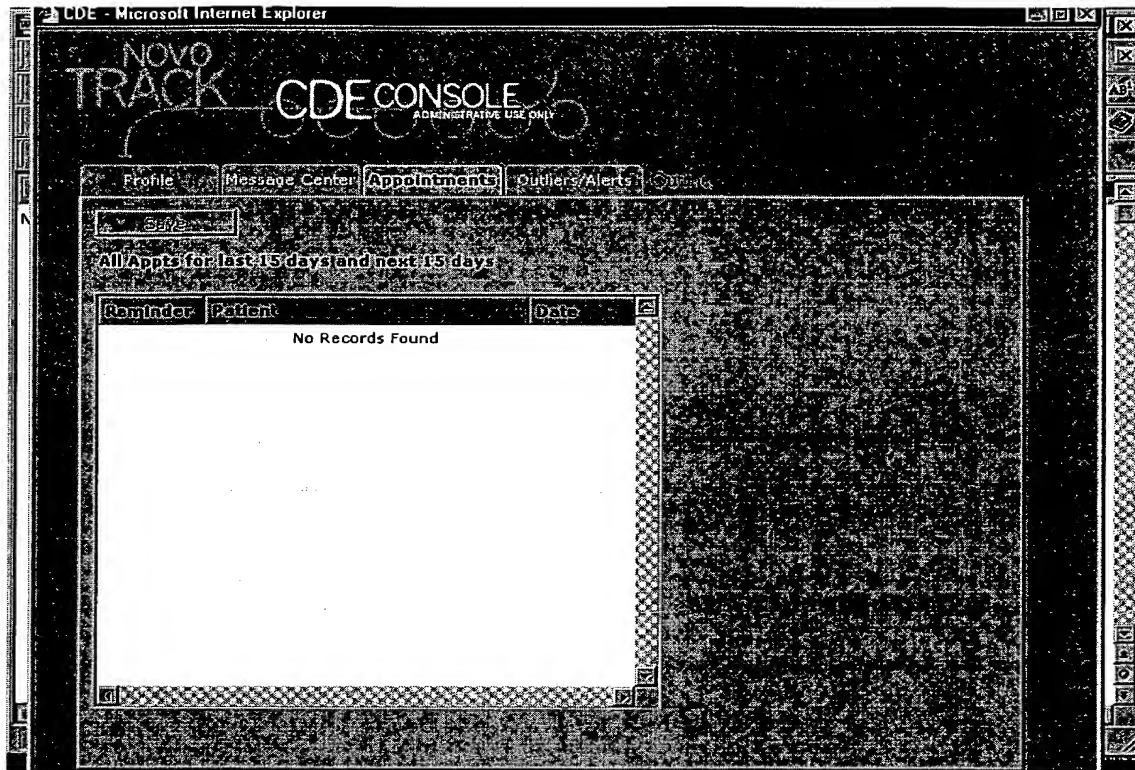


FIG. 70

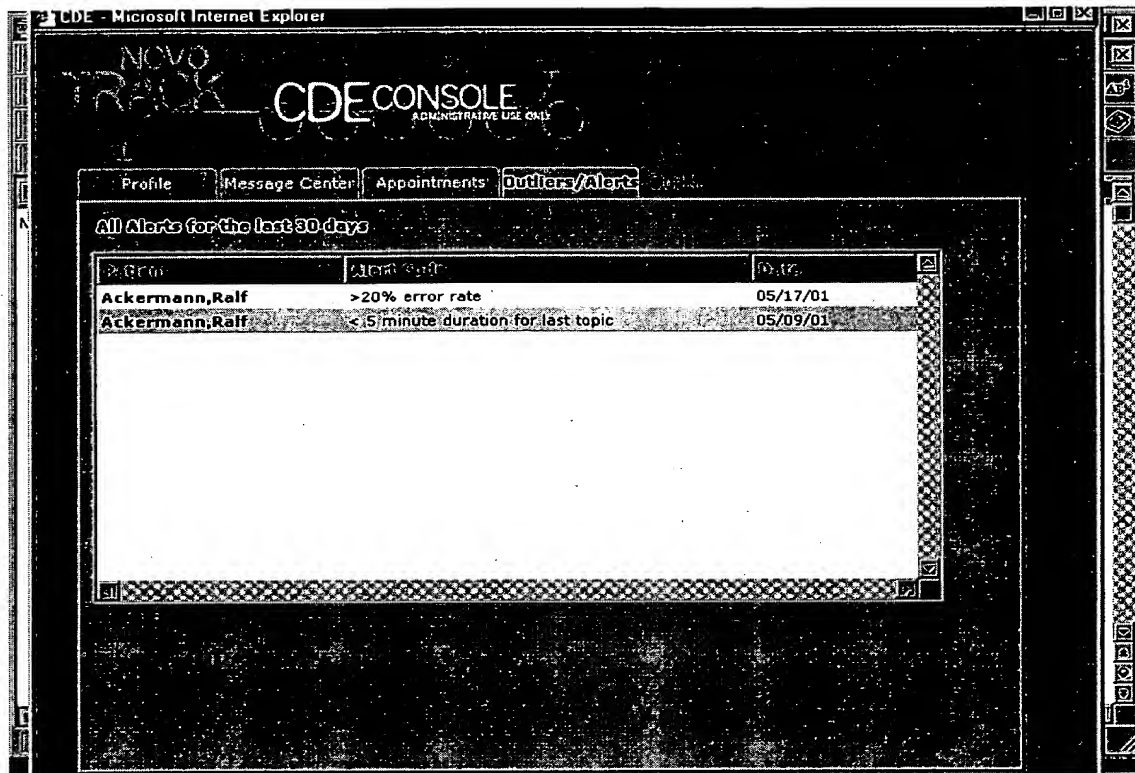


FIG. 7P



# FIG. 8A

## NovoTrack Guide To Good Care Outline

### Key

0.0e	Title of the Topic	Medical Record Data	Patient Attitude Data	Questions
------	--------------------	---------------------	-----------------------	-----------

Numbering sequence is by track, then topic. Note that a letter after the number indicates a choice of article for that topic depending on patient characteristics entered by the patient in response to questions at the time of registration. Both the CDE and patient can edit data if required.

**Track 1 - Getting Good Care** (4 articles: This section has 1 **Medical Record** choice and 1 **Patient Attitude** response at registration to choose perspective for the articles.)

1.1	Defining Quality Care			Questions
1.2a	Caring for Yourself		New Diagnosis	Questions
1.2b	Caring for Yourself		Established Patterns	Questions
1.3	Your Diabetes Care Team			Questions
1.4a	Proof that Good Care Matters	Type 1		Questions
1.4b	Proof that Good Care Matters	Type 2		Questions

**Track 2 - What is Diabetes** (4 articles: This section has 1 **Medical Record** choice at registration to choose perspective for the articles.)

2.1	Before You Had Diabetes			Questions
2.2a	What Causes Diabetes	Type 1		Questions
2.2b	What Causes Diabetes	Type 2		Questions
2.3a	Effects of Diabetes	Type 1		Questions
2.3b	Effects of Diabetes	Type 2		Questions
2.4a	Who Gets Diabetes	Type 1		Questions
2.4b	Who Gets Diabetes	Type 2		Questions

**Track 3 - Healthy Eating & Exercise** (2 articles: This section has 2 **Medical Record** choices and 1 **Patient Attitude** response at registration to choose perspective for the articles.)

3.1a	Healthy Eating	Type 1		Questions
3.1b	Healthy Eating	Type 2 BMI < 28		Questions
3.1c	Healthy Eating	Type 2 BMI > 28		Questions
3.2a	Healthy Exercise	Type 1	Sedentary	Questions
3.2b	Healthy Exercise	Type 1	Active	Questions
3.2c	Healthy Exercise	Type 1	Disabled	Questions
3.2d	Healthy Exercise	Type 2	Sedentary	Questions
3.2e	Healthy Exercise	Type 2	Active	Questions
3.2f	Healthy Exercise	Type 2	Disabled	Questions

**Track 4 - Using Medications Wisely** (8 articles: This section has 1 **Medical Record** choice and 2 **Patient Attitude** responses at registration to choose perspective for the articles.)



## FIG. 8B

4.1a	Choosing The Right Insulin	Type 1		Questions
4.1b	How Diabetes Medications Work	Type 2		Questions
4.2a	Intensive Insulin Therapy	Type 1		Questions
4.2b	Combinations Of Medications	Type 2		Questions
4.3a	Practical Tips For Insulin Use	Type 1		Questions
4.3b	Insulin For Your Diabetes	Type 2	Accepts Injections	Questions
4.3c	Insulin For Your Diabetes	Type 2	Rejects Injections	Questions
4.4a	Hypoglycemia	Type 1		Questions
4.4b	Hypoglycemia	Type 2		Questions
4.5a	Monitoring Your Blood Sugar	Type 1	Infrequent Monitoring	Questions
4.5b	Monitoring Your Blood Sugar	Type 1	Frequent Monitoring	Questions
4.5c	Monitoring Your Blood Sugar	Type 2	Infrequent Monitoring	Questions
4.5d	Monitoring Your Blood Sugar	Type 2	Frequent Monitoring	Questions
4.6	Treating High Cholesterol			Questions
4.7	Treating High Blood Pressure			Questions
4.8	Benefits of Aspirin			Questions

Track 5 - Family, Friends & Feelings (4 articles: This section has 1 **Patient Attitude** response at registration to choose perspective for the articles.)

5.1a	A Healthy Attitude		Optimistic	Questions
5.1b	A Healthy Attitude		Balanced	Questions
5.1c	A Healthy Attitude		Pessimistic	Questions
5.2	Setting Goals			Questions
5.3	Family & Friends			Questions
5.4	Getting Help			Questions

Track 6 - Complications (7 articles: This section has 5 **Medical Record** choices and 1 **Patient Attitude** response at registration to choose perspective for the articles.)

6.1a	Preventing Retinopathy	Complication Absent		Questions
6.1b	Treating Retinopathy	Complication Present		Questions
6.2a	Preventing Neuropathy	Complication Absent		Questions
6.2b	Treating Neuropathy	Complication Present		Questions
6.3a	Preventing Nephropathy	Complication Absent		Questions
6.3b	Treating Nephropathy	Complication Present		Questions
6.4a	Foot Care	Low Risk		Questions
6.4b	Foot Care	High Risk		Questions
6.5a	Preventing Heart Disease	No Ischemia		Questions
6.5b	Treating Heart Disease	Prior/Current Ischemia		Questions

## FIG. 8C

6.6a	Smoking		Nonsmoker	Questions
6.6b	Smoking		Smokes - Wants to quit	Questions
6.6c	Smoking		Smokes - Doesn't want to quit	Questions
6.7	Dental Care			Questions

Track 7 - Special Situations (5 articles: This section has 3 **Medical Record** choices at registration to choose perspective for the articles.)

7.1a	Driving	Type 1		Questions
7.1b	Driving	Type 2		Questions
7.2a	Traveling	Type 1		Questions
7.2b	Traveling	Type 2		Questions
7.3a	Employment	< 62 years old		Questions
7.3b	Retirement	> 62 years old		Questions
7.4a	Insurance	< 62 years old		Questions
7.4b	Medicare	> 62 years old		Questions
7.5a	Men's Sexuality	Male		Questions
7.5b	Women's Sexuality	Female, < 45 years old		Questions
7.5c	Women's Sexuality	Female, > 45 years old		Questions
7.6a	Sick Days	Type 1		Questions
7.6b	Sick Days	Type 2		Questions

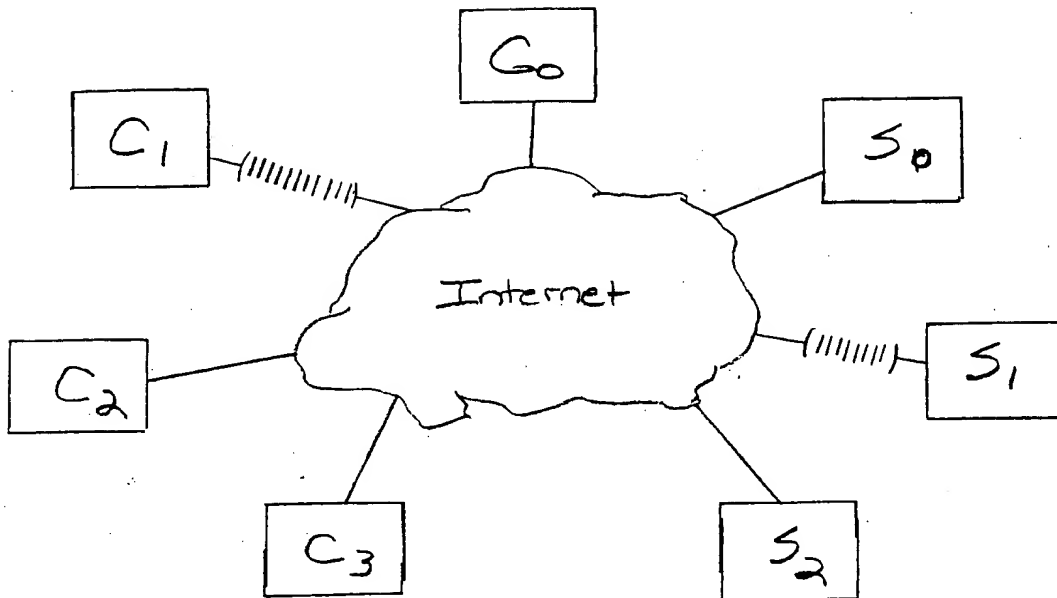


FIG. 9  
PRIOR ART

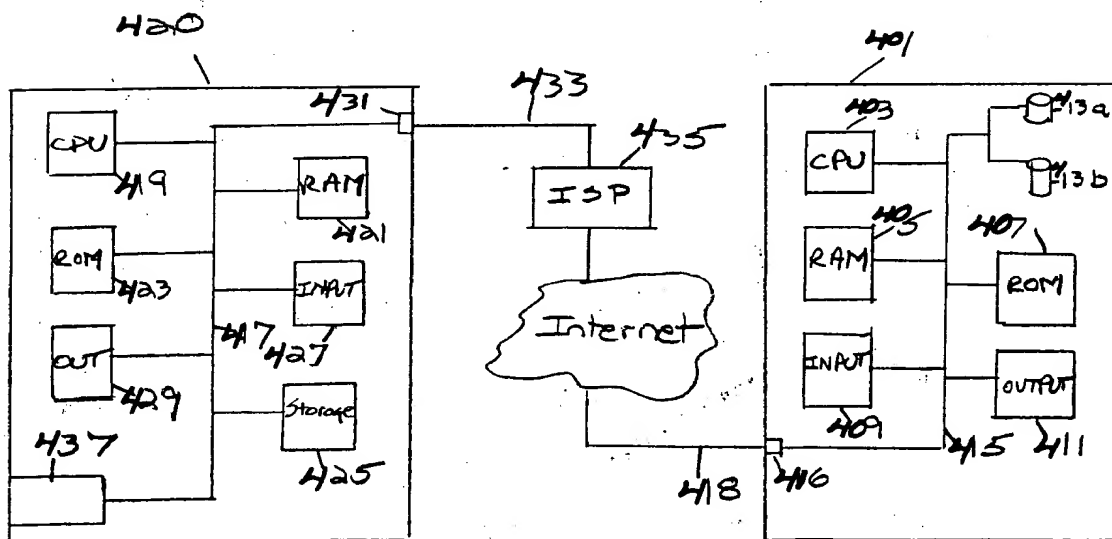


FIG. 10  
PRIOR ART